ZONING VARIANCE FORM



ADDRESS OF SUBJECT PROPERTY:	2244 Corporate Lane 110
PARCEL IDENTIFICATION NUMBER (PIN):	0703207006 0000 see recorded plat of survey attached w/word document legal description
1. PETITIONER: Thomas Burges	ss GST Trust
PETITIONER'S ADDRESS: PO BOX	
CITY: Gieneua STATE: 12	ZIP CODE: 60134
PHONE: 630-585-002 EMAIL ADDRESS:	becky@ burgescommerc
II. OWNER(S): Thomas Burgess	GST Trust
OWNER'S ADDRESS: PO Box 568	
CITY: GREATELOCK, STATE: 1L	ZIP CODE: 60134
PHONE: 630-585-002 EMAIL ADDRESS:	becky@burgesscommercial.
III. PRIMARY CONTACT (review comments sent to the	
RELATIONSHIP TO PETITIONER:	
PHONE: 630-202-8399 EMAIL ADDRESS:	A CONTRACTOR OF THE CONTRACTOR
IV. OTHER STAFF	
NAME: Steven J Barnes J	г.
RELATIONSHIP TO PETITIONER: Architectural Consult	ant
PHONE: 630-202-8399 EMAIL ADDRESS:	s-barnes@comcast.net
NAME:	
RELATIONSHIP TO PETITIONER:	
PHONE FMAIL ADDRESS	-

ZONING VARIANCE FORM



V. SUBJECT PROPERTY INFORMATION

ZONING VARIANCE FORM



VII. OWNER'S AUTHORIZATION LETTER

I/we hereby certify that I/we am/are the owner(s) of the above described Subject Property. I/we am/are respectfully requesting processing and approval of the request(s) referenced in this Petition. I/we hereby authorize the Petitioner listed on this Petition to act on my/our behalf during the processing and presentation of this request(s).

Reviera Colbert	
(Signature of 1st Owner or authorized agent)	(Signature of 2 nd Owner or authorized agent)
11-5-21	<u> </u>
(Date)	(Date)
Thomas Burgess GST TRUST 1st Owner's Printed Name and Title	and o
1 Owner's Printed Name and Title	2 nd Owner's Printed Name and Title
SUBSCRIBED AND SWORN TO before me t	this 3th day of Movember, 2021
Light Sex	
(Notary Public and Seat)	
"OFFICIAL SEAL" KIMBERLY A. HOADLE	Y
Notary Public, State of Illing Commission expires 11/06	01S V 124

CITY OF NAPERVILLE DISCLOSURE OF BENEFICIARIES

In compliance with Title 1 (Administrative), Chapter 12 (Disclosure of Beneficiaries) of the Naperville Municipal Code ("Code"), as amended, the following disclosures are required when any person or entity applies for permits, licenses, approvals, or benefits from the City of Naperville unless they are exempt under 1-12-5:2 of the Code. Failure to provide full and complete disclosure will render any permits, licenses, approvals or benefits voidable by the City.

1.	Petitioner:	THOMAS BURG	3E86	GET TRUST
	Address:	P.O. BOX 56	8	
		GENEVA IL	, 60	0134
2.	Nature of Be	nefit sought: PARK	ING"	VARIANCE
3.	Nature of Pe	titioner (select one):		
	a.	Individual	e.	Partnership
	b.	Corporation	f.	Joint Venture
	c.	Land Trust/Trustee	g.	Limited Liability Corporation (LLC)
	d.	Trust/Trustee	h.	Sole Proprietorship
4.	If Petitioner is of Petitioner:		cribed	in Section 3, briefly state the nature and characteristics
		Н.	Δ,	

- 5. If your answer to Section 3 was anything other than "Individual", please provide the following information in the space provided on page 11 (or on a separate sheet):
 - Limited Liability Corporation (LLC): The name and address of all members and managing members, as applicable. If the LLC was formed in a State other than Illinois, confirm that it is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
 - Corporation: The name and address of all corporate officers; the name and address of every person who owns five percent (5%) or more of any class of stock in the corporation; the State of incorporation; the address of the corporation's principal place of business. If the State of incorporation is other than Illinois, confirm that the corporation is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
 - Trust or Land Trust: The name, address and interest of all persons, firms, corporations or other entities who are the beneficiaries of such trust.
 - Partnerships: The type of partnership; the name and address of all general and limited
 partners, identifying those persons who are limited partners and those who are general
 partners; the address of the partnership's principal office; and, in the case of a limited
 partnership, the county where the certificate of limited partnership is filed and the filing
 number.
 - Joint Ventures: The name and address of every member of the joint venture and the nature of the legal vehicle used to create the joint venture.
 - **Sole Proprietorship:** The name and address of the sole proprietor and any assumed name.
 - Other Entities: The name and address of every person having a proprietary interest, an interest in profits and losses or the right to control any entity or venture not listed above.

	Lindsey Burgess
	Lauren Burgess
	Brad Buracss
6.	Name, address and capacity of person making this disclosure on behalf of the Petitioner:
	Relocca Collbert
	2228 ferry Rd. #101 Naperville, 12 60563
VERIFI	CATION
that I a	(print name), being first duly sworn under oath, depose and state m the person making this disclosure on behalf of the Petitioner, that I am duly authorized to make sclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the ents contained therein are true in both substance and fact.
Signatu	ire: Reboeca (Albort
Subscri	ibed and Sworn to before me this 31 day of Movember, 2031.
V.	
Notary	Public and seal "OPFICIAL SEAL" KIMBERLY A. HOADLEY Notary Public, State of Illinois